

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Senate Conservatives Fund			FEC IDENTIFICATION NUMBER ▼ C C00448696		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-between; width: 200px;"> <div><input type="text" value="MM"/> <input type="text" value="MM"/> / <input type="text" value="DD"/> <input type="text" value="DD"/> / <input type="text" value="YY"/> <input type="text" value="YY"/> <input type="text" value="YY"/> <input type="text" value="YY"/></div> <div><input type="text" value="MM"/> <input type="text" value="MM"/> / <input type="text" value="DD"/> <input type="text" value="DD"/> / <input type="text" value="YY"/> <input type="text" value="YY"/> <input type="text" value="YY"/> <input type="text" value="YY"/></div> <div><input type="text" value="MM"/> <input type="text" value="MM"/> / <input type="text" value="DD"/> <input type="text" value="DD"/> / <input type="text" value="YY"/> <input type="text" value="YY"/> <input type="text" value="YY"/> <input type="text" value="YY"/></div> </div>					
Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination <div><input type="text" value="MM"/> <input type="text" value="MM"/> / <input type="text" value="DD"/> <input type="text" value="DD"/> / <input type="text" value="YY"/> <input type="text" value="YY"/> <input type="text" value="YY"/> <input type="text" value="YY"/></div> <div>10 / 04 / 2014</div>		
Mailing Address PO Box 388			Amount <div><input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/></div> <div>669.75</div>		
City Alexandria		State VA		Zip Code 22313-0388	
Purpose of Expenditure IE-Cotton-Online Processing			Category/Type <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/>		
Name of Federal Candidate Thomas Cotton			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► General 2014		
<div><input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/></div> <div>41039.66</div>					
Full Name of Payee Jamestown Associates			Date of Public Distribution/Dissemination <div><input type="text" value="MM"/> <input type="text" value="MM"/> / <input type="text" value="DD"/> <input type="text" value="DD"/> / <input type="text" value="YY"/> <input type="text" value="YY"/> <input type="text" value="YY"/> <input type="text" value="YY"/></div> <div>10 / 09 / 2014</div>		
Mailing Address 5 Mapleton Rd Ste 300			Amount <div><input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/></div> <div>2500.00</div>		
City Princeton		State NJ		Zip Code 08540-9646	
Purpose of Expenditure IE-Cotton-Media Production			Category/Type <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/>		
Name of Federal Candidate Thomas Cotton			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► General 2014		
<div><input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/></div> <div>58289.66</div>					
(a) SUBTOTAL of Itemized Independent Expenditures..... ►			<div><input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/></div> <div>3169.75</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ►			<div><input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/></div>		
(c) TOTAL Independent Expenditures..... ►			<div><input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="MM"/></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Paul Kilgore</u>			Date <div><input type="text" value="MM"/> <input type="text" value="MM"/> / <input type="text" value="DD"/> <input type="text" value="DD"/> / <input type="text" value="YY"/> <input type="text" value="YY"/> <input type="text" value="YY"/> <input type="text" value="YY"/></div> <div>10 / 09 / 2014</div>		

[Electronically Filed]